

UTILITY PATENT APPLICATION
TRANSMITTAL

(For new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. **FA1224 US NA**

First Named Inventor or Application Identifier

Carmen Flosbach**"EXPRESS MAIL CERTIFICATE"****"EXPRESS MAIL" MAILING LABEL NUMBER** ER 430765555 US **DATE OF DEPOSIT:** February 19, 2004

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NAME OF PERSON MAILING PAPER OR FEE

(TYPE OR PRINT) Jeannette Y. Rayfield

SIGNATURE SIGN

Jeannette Rayfield

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		9. <input checked="" type="checkbox"/> The Title of the Invention: Process For The Production Of Polyurethane Di(Meth)Acrylates
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. <u>04-1928</u> . <input checked="" type="checkbox"/> General Authorization to charge any and all fees under 37 CFR 1.16 or 1.17, including petitions for extensions of time, relating to this application. (37 CFR 1.136(a)(3)) <i>(Submit an original, and a duplicate for fee processing)</i>	2. <input type="checkbox"/> A Check in the Amount of \$ _____ is enclosed <input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required and credit any overpayment to Deposit Account <u>04-1928</u> .	10. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies d. <input type="checkbox"/> Use the identical computer-readable form filed in Application No. _____, filed _____ as the computer-readable form for the instant application. (37 CFR 1.821(e))
3. <input checked="" type="checkbox"/> The total fee is calculated as shown below: Basic Filing fee \$ 770.00 Total Claims 10 - 20 = 0 x \$18 \$ 0.00 Independent Claims 1 - 3 = 0 x \$86 \$ 0.00 <input type="checkbox"/> Multiple Dependent Claim present \$ 0.00 TOTAL FILING FEE \$ <u>770.00</u> <input type="checkbox"/> Reduction by 50% for filing by Small Entity \$ _____ <input type="checkbox"/> Cancel in this application original claims <u> </u> to <u> </u> of the prior application before calculating the filing fee. Charge \$ _____ to the above indicated Deposit Account.	11. ACCOMPANYING APPLICATION PARTS a. <input type="checkbox"/> Information Disclosure Statement (IDS) b. <input checked="" type="checkbox"/> Form PTO/SB/08a c. <input checked="" type="checkbox"/> Copies of all IDS Citations	
4. <input checked="" type="checkbox"/> Specification excluding Drawings [Total Pages] <u>14</u>	12. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets] _____	13. <input type="checkbox"/> Prior Application is Assigned to: <u>E.I. du Pont de Nemours and Company</u> <i>(for continuation/divisional with Box 20a completed)</i>	
6. <input checked="" type="checkbox"/> Declaration and Power of Attorney [Total Pages] <u>6</u> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 19a completed)</i> c. <input checked="" type="checkbox"/> Unsigned Declaration <i>[Note Box 6 below]</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	14. <input type="checkbox"/> Preliminary Amendment	
7. <input checked="" type="checkbox"/> Application Data Sheet 37 CFR 1.76	15. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
8. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 6b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 6b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	16. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
	17. <input type="checkbox"/> Transfer all references cited by Applicants or by the Examiner from the parent Application Serial No. filed <u> </u> . A PTO-1449 listing the references is enclosed.	
	18. <input type="checkbox"/> Applicant Claims Small Entity Status	
	19. <input type="checkbox"/> Other :	

20. Priority Information, check appropriate box and supply the requisite information	
a The accompanying application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) Of prior application No: filed <u> </u> Examiner: <u> </u> Group/Art: <u> </u>	
21. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number: <u>23906</u> Address <u>E.I. du Pont de Nemours and Company</u> Telephone (302) 984-6058 Fax (302) 658-1192	22. RESPECTFULLY SUBMITTED, Signature <u>Hilmar L. Fricke</u> Name Hilmar L. Fricke Date <u>February 19, 2004</u> Registration No. <u>22,384</u>

23. The Power of Attorney in the Prior Application includes: _____

☐ Recognize as Associate Attorney: _____
Attorney Registration No.

and address future correspondence to same as indicated in Box 21.

The invention was made by an agency of the U. S. Government or under a contract with an agency of the U. S. Government.

☒ No.

☐ Yes, the name of the U.S. Government agency and the Government contract number are: _____.

(preferred arrangement of specification set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings *(if filed)*
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="margin: 5px 0 0 40px;"><i>Patent fees are subject to annual revision.</i></p>		<p style="text-align: right; margin: 0;">Complete if Known</p>	
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Application Number	Unknown
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Filing Date	February 19, 2004
		First Named Inventor	Carmen Flosbach
		Examiner Name	Unknown
		Group / Art Unit	Unknown
		Attorney Docket No.	FA1224 US NA

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																										
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: <div style="margin-left: 20px;"> Deposit Account Number: 04-1928 Deposit Account Name: E. I. du Pont de Nemours and Company </div> <p style="margin-top: 10px;">The Commissioner is authorized to: (check all that apply)</p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account	<h3 style="margin: 0;">3. ADDITIONAL FEES</h3> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Large Entity</th> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Small Entity</th> <th style="text-align: left; border-bottom: 1px solid black;">Fee Description</th> <th style="text-align: right; border-bottom: 1px solid black;">Fee Paid</th> </tr> <tr> <th style="text-align: left;">Fee Code</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: left;">Fee Code</th> <th style="text-align: right;">Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>1051</td><td style="text-align: right;">130</td><td>2051</td><td style="text-align: right;">65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td style="text-align: right;">50</td><td>2052</td><td style="text-align: right;">25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td style="text-align: right;">130</td><td>2053</td><td style="text-align: right;">130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td style="text-align: right;">2,520</td><td>1812</td><td style="text-align: right;">2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td style="text-align: right;">920*</td><td>1804</td><td style="text-align: right;">920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td style="text-align: right;">1,840*</td><td>1805</td><td style="text-align: right;">1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td style="text-align: right;">110</td><td>2251</td><td style="text-align: right;">55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td style="text-align: right;">420</td><td>2252</td><td style="text-align: right;">210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td style="text-align: right;">950</td><td>2253</td><td style="text-align: right;">475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td style="text-align: right;">1,480</td><td>2254</td><td style="text-align: right;">740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td style="text-align: right;">2,010</td><td>2255</td><td style="text-align: right;">1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td style="text-align: right;">330</td><td>2401</td><td style="text-align: right;">165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td style="text-align: right;">330</td><td>2402</td><td style="text-align: right;">165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td style="text-align: right;">290</td><td>2403</td><td style="text-align: right;">145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td style="text-align: right;">1,510</td><td>1451</td><td style="text-align: right;">1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td style="text-align: right;">110</td><td>2452</td><td style="text-align: right;">55</td><td>Petition to revive - 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<h3 style="margin: 0;">FEE CALCULATION</h3> <h4 style="margin: 5px 0 0 0;">1. 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EXTRA CLAIM FEES</h4> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Total Claims</td> <td style="width: 10%; text-align: center;">10</td> <td style="width: 10%; text-align: center;">-20**</td> <td style="width: 10%; text-align: center;">=</td> <td style="width: 10%; text-align: center;">0</td> <td style="width: 10%; text-align: center;">X</td> <td style="width: 10%; text-align: center;">18</td> <td style="width: 10%; text-align: center;">=</td> <td style="width: 10%; text-align: center;">0</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">1</td> <td style="text-align: center;">-3**</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> <td style="text-align: center;">X</td> <td style="text-align: center;">86</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Multiple Dependent</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td style="text-align: center;">X</td> <td style="text-align: center;">290</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> </tr> </table> <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Large Entity</th> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">Small Entity</th> <th style="text-align: left; border-bottom: 1px solid black;">Fee Description</th> <th style="text-align: right; border-bottom: 1px solid black;">Fee Paid</th> </tr> <tr> <th style="text-align: left;">Fee Code</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: left;">Fee Code</th> <th style="text-align: right;">Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>1202</td><td style="text-align: right;">18</td><td>2202</td><td style="text-align: right;">9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td style="text-align: right;">86</td><td>2201</td><td style="text-align: right;">43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td style="text-align: right;">290</td><td>2203</td><td style="text-align: right;">145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td style="text-align: right;">86</td><td>2204</td><td style="text-align: right;">43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td style="text-align: right;">18</td><td>2205</td><td style="text-align: right;">9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5" style="text-align: right; padding-top: 10px;">SUBTOTAL (2)</td><td style="text-align: right; border: 1px solid black;">(\$ 0.00)</td></tr> </tbody> </table> <p style="margin-top: 10px; font-size: small;">**or number previously paid, if greater; For Reissues, see above</p>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)			1001	770	2001	385	Utility filing fee	770	1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(\$ 770)	Total Claims	10	-20**	=	0	X	18	=	0	Independent Claims	1	-3**	=	0	X	86	=	0	Multiple Dependent	<input type="checkbox"/>				X	290	=	0	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)			1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple dependent claim, if not paid		1204	86	2204	43	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$ 0.00)	<p style="margin-top: 10px;">Reduction by Basic Filing Fee Paid</p> <p style="text-align: right; margin-top: 10px;">SUBTOTAL (3) (\$ 0)</p>																																																															
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Hilmar L. Fricke	Registration No. Attorney/Agent)	22,384
Signature		Telephone	(302) 984-6058
		Date	February 19, 2004

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PROCESS FOR THE PRODUCTION OF POLYURETHANE DI(METH)ACRYLATES

Application No.: Unknown

Filing Date: February 19, 2004

First Named Inventor: Carmen Flosbach al.

Group Art Unit: Unknown

Examiner: Unknown

Attorney Docket: FA 1224 US NA

Fee Transmittal

Application — 14 pages

Application Data Sheet

Form PTO/SB/08a with reference

Declaration/Power of Attorney (not executed) (6 pages)

Authorization to charge Deposit Account 04-1928

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